

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>8-6-03</u>		2 Serial/Patent # <u>10/045,297</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
<input checked="" type="checkbox"/>	Petition	4	7/3/03	\$ 1300 ⁰⁰							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ 1300 ⁰⁰							
		8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check									
	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:								
	Duplicate Payment		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>5</td><td>0</td><td>--</td><td>0</td><td>6</td><td>6</td><td>5</td></tr></table>		5	0	--	0	6	6	5
5	0	--	0	6	6	5					
<input checked="" type="checkbox"/>	No Fee Due (Explanation):										
<p><i>Petition Under 37 CFR 1.177(b) is dismissed as moot.</i></p>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Wm. Haymon</u>		TITLE: <u>Ret. Exam</u>									
SIGNATURE: <u>Wm. Haymon</u>		PHONE: _____									
OFFICE: _____											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u><i>Alice Hill</i></u>		DATE: <u>8/7/03</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**